Docket No. 10490

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name, and I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed for which a patent is sought on the invention entitled:

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METH	IOD ANI	D APPARATUS FOR DAN	IPING A CORONA WIRE IN AN ELECT	FROGRAPHIC PRINTE
the ap	plication	of which		
	[X] []	is attached hereto. was filed on (if applicable).	as Application Serial No.	and was amended on
application duty to	ation incl disclose	luding the claims, as amer	inderstand the contents of the attached of nded by any amendment referred to above erial to the examination of this application ection 1.56.	ve. I acknowledge the

CLAIM FOR BENEFIT OF PRIOR APPLICATION(S)

I hereby claim the benefit under Title 35, United States Code, Sections 365, 120 and/or 119 of all United States, PCT international and/or foreign application(s) listed below and insofar as the subject matter of each of the claims of this application is not disclosed in such prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a), which occurred between the filing date of the prior application and the national or PCT international filing date of this application and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Application Serial Number(s)	Country	Filing Date (MM/DD/YYYY)	
60/413,805	USA	09/26/2002	

I hereby appoint as my attorneys and/or agent(s):

James A. Cairns, Reg. No. 32,557 Richard A. Romanchik, Reg. No. 33,766 Kevin L. Leffel, Reg. No. 37,379

with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all telephone calls to: Kevin L. Leffel at (585) 512-8434.

Please mail all correspondence to:

Kevin L. Leffel Heidelberg Digital L.L.C. 2600 Manitou Road Rochester, NY 14624

I declare further that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of Inventor: Residence (City): Post Office Address:	Douglas William DeHollander Clarkson 361 Lawrence Road, Brockport, NY 14420	Citizenship: USA State/Foreign Country: NY
Inventor's Signature		
Date		
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Date	19-03	
Full Name of Inventor: Residence (City): Post Office Address:	Citizenship: USA State/Foreign Country: NY	
Inventor's Signature	and Ruchard Pale	
Date <i>9[/</i>	9/03	